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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	See Schedule A 09/752278
Filing Date	See Schedule A
First Named Inventor	
Art Unit	
Examiner Name	
Attorney Docket Number	1683-GEN

To: Commissioner for P.O. Box 1450 Alexandria, VA 223						
I hereby apply to withdrav	vas attorney or agent for the above ide	entified p	atent app	licatio	n.	
The reasons for this requ	est are:					
Applicant has requested the file	s listed in the attached Schedule A be transf	erred to n	ew Attorne	у.		
	CORRESPONDENCE ADDR	ESS				
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Individual Name	Fred H. Zollinger, III					
Address	6370 Mt. Pleasant Ave. NW					
Address	P.O. Box 2368					
City	North Canton	State	ОН		ZIP	44720
Country	US					
Telephone	330-526-0104	Fax	1-866-311	-9964		
This request is made on	behalf of myself and				-	
all the attomeys/age						
	(with registration numbers) listed on the			r		
	associated with Customer Number	27542				
This request is enclosed in tri	plicate (including any attachments).					
Name Joseph	A. Sebolt	l De Lie	-11 84			
Signature	Registra	ation No.	35	325	·····	
Date 8.18	. 04					
NOTE: Withdrawal is effective approval of withdrawal and the withdraw is normally disappro	when approved rather than when receive e expiration date of a time period for respo ved.	d. Unles onse or po	s there are ossible exte	at lea ension	st 30 da period,	ys between the request to

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Count			3		LENS 5	ING 6	ING 7	NI 8	JC 9	AG LASER 10	=		D WIRE 13
Title	POSTERIOR-CHAMBER PHAKIC INTRAOCULAR LENS	POSTERIOR-CHAMBER PHAKIC INTRAOCULAR LENS	CONTACT LENS ABLATION	ANTIOXIDANT PHAKIC INTRAOCULAR LENS	ANTIOXIDANT PHAKIC INTRAOCULAR LENS	METHOD AND APPARATUS FOR TREATING PRESBYOPIA	METHOD AND APPARATUS FOR TREATING PRESBYOPIA	METHOD AND APPARATUS FOR TREATING PRESBYOPIA	INVISIBLE ANTERIOR CHAMBER PHAKIC INTRAOCULAR LENS	HAPTIC THAT CAN BE MOVED WITH YAG LASER	VAULTED INTRAOCULAR LENS	PINHOLE INTRAOCULAR LENS	COMBINATION MEROCEL SPONGE AND WIRE
Application Serial Number, Patent No.		60/580,424 PC))	09/342,954 AN	60/091,146 AN	M 09/752,273 M	10/833,221 M	60/173,448 M	<u>-</u>	H	Λ	P	S
Client Name, Client Case No.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr. George W.	Rozakis, Dr.
Case	1683001US1APV	1683001US2AV	1683-A-PRO	1683-B	1683-B-PRO	1683-G	1683-G-DIV	1683-G-PRO	1683-H-PRO	1683-I-PRO	1683-K-PRO	1683-M-PRO	1683-N-PRO

